



## Land Use Services Department Fire Hazard Abatement

Tom Hudson  
Director

### Fire Hazard – Notice to Abate Appeal Form

#### FORM MUST BE RETURNED BY THE NOTICE TO ABATE COMPLIANCE DATE

DATE OF FORM SUBMISSION \_\_\_\_\_

ASSESSOR'S PARCEL NUMBER (APN) \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DO YOU WISH TO APPEAR IN PERSON? YES ☐ NO ☐ OR DO YOU WISH TO APPEAR BY PHONE? YES ☐  
I PREFER ☐ AM ☐ PM APPOINTMENT OR NO PREFERENCE ☐

We will try to accommodate your request but the selected preference is not guaranteed.

Your appeal will be heard and a decision delivered in your absence if "NO" is checked or no selection is made. You will be notified by mail of the Board's decision. **NOTE:** A decision from the Board of Appeals concludes the administrative process and is not reviewable by this agency or the Appeal panel.

Reason for Appeal (Must be completed, attach additional sheets if needed) :

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**\$213.00 FILING FEE REQUIRED.** Your appeal will not be accepted unless a \$213.00 (per parcel) check or money order is included with this appeal form. Filing fee and appeal form must be submitted to:

LAND USE SERVICES DEPARTMENT  
ATTN: FHA APPEALS  
385 N. ARROWHEAD AVE. FIRST FLOOR  
SAN BERNARDINO, CA 92415-0187

\$213.00 fee is non-refundable unless Land Use Services Fire Hazard Abatement is found to be wholly erroneous in abatement administration and/or ordinance process.

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APPELLANT SIGNATURE

DATE